



D6-27-05

PART B - FEE(S) TRANSMITTAL

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35489 7590 06/02/2005

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H.E.W.M. LLP

06/28/2005 HGUTEMA2 00000026 081641 09903562

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:18001 APPLICATION NO. 6.00 DA

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

09/903,562

07/11/2001

Napoleone Ferrara

10466/51

1139

TITLE OF INVENTION: SECRETED AND TRANSMEMBRANE POLYPEPTIDES AND NUCLEIC ACIDS ENCODING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	09/02/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEBERRY, REGINA M	1647	530-387300

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	
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Mark T. Kresnak, Ph.D.
1 Elizabeth M. Barnes, Ph.D.
2 Ginger R. Dreger, Esq.
3 Heller Ehrman, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Genentech, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

South San Francisco, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
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 Advance Order - # of Copies 2

4b. Payment of Fee(s):

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1641 (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Daphne Reddy
Typed or printed name Daphne Reddy

Date June 24, 2005Registration No. 53,507

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